3673

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Under the Paperwork Reduction A	ct of 1995, no persons an	e required to respond to a collection Application Number	on of information unless it displays a valid OMB control numb			
		Filing Date	April 5, 2000			
TRANSMITT	4L	First Named Inventor	Maksim KADIU			
FORM		Group Art Unit	3673			
(to be used for all correspondence after initial filing)		Examiner Name	G. Hartmann			
Total Number of Pages in This Submiss	22 pgs.+	Attorney Docket Numbe				
	ENCLOS	URES (check all t	hat apply)			
Fee Transmittal Form, submitted in duplicate (2 pages)	Assignment I		After Allowance Communication to Group			
Fee Attached	Drawing(s)		Appeal Communication to Board of Appeals and Interferences			
Amendment/Reply `	Licensing-rel	ated Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)			
After Final	Petition		Proprietary Information			
Affidavits/declaration(s)	Petition to Co	onvert to a Provisional	Status Letter			
Extension of Time Request		rney, Revocation prrespondence Address	X Other Enclosure(s) (please identify below)			
Express Abandonment Request	Terminal Dis	claimer	Form PTO-1449, submitted in duplicate (16 pages)			
Information Disclosure Statement (3 pages)	Request for	Refund	2. Two hundred nine (209) references Return postcard			
Certified Copy of Priority Document(s)	CD, Number	of CD(s)	GA JULEN			
Response to Missing Parts/ Incomplete Application	Remarks		70/12 20h			
Response to Missing Parts under 37 CFR 1.52 or 1.53			2. Two hundred nine (209) references Return postcard			
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m MORRISON & FOE dividual Name			25226			
ignature 7. Thus	leles	l_	PATENT TRADEMARK OFFICE			

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: June 19, 2003 Signature: Ambuly A. Burjumic (Kimberty A. Benjamin)

Date

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PTO/SB/17 (01-03) Approved for use through 04/30/2003. OMB 0651-0032 formation unless it displays a valid OMB control number.

Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (s) 180.00 Attorney Docket No. 543572000100 METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) Fee Paid Code (s) Code	Under the Paperwork Reduction Act of 1995, no persons are requir			red to respond to a collection of information unless it displays a valid OMB control nur Complete if Known							
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The Commissioner is hereby authorized below X Credit any overpayments 1053 130 1053 130 Non-English specification	Name	1052	50	2052	25		- late provisio	onal filing fee or cover			
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